

SPEAKER PROPOSAL TO PRESENT
2018 Kansas Immunization Conference
Tony's Pizza Event Center, Salina, KS
June 13 – 14, 2018

Please complete the following pages, no later than December 31, 2017. Complete form and e-mail to Phil Griffin, Deputy Director, Bureau of Disease Control and Prevention, at phil.griffin@ks.gov . For more information, contact Phil by email or at (785) 296-8893. Accepted proposals will be featured in conference breakout sessions of 50 minutes. Please complete ALL sections. Incomplete proposals may not be accepted. Each proposal accepted will be compensated with one complementary registration to the 2018 Kansas Immunization Conference.

Proposed Session Title: (12 words maximum)

Principal Presenter: This person will serve as the primary contact and will be responsible for coordinating the session content and communicating with co-presenter.

Name: _____ Title: _____ Credentials: _____
Organization: _____
Address: _____ City: _____ Zip: _____
Phone: _____ Fax: _____ E-mail: _____

Co-Presenter(s):

Name: _____ Title: _____ Credentials: _____
Organization: _____
Address: _____ City: _____ Zip: _____
Phone: _____ Fax: _____ E-mail: _____

Name: _____ Title: _____ Credentials: _____
Organization: _____
Address: _____ City: _____ Zip: _____
Phone: _____ Fax: _____ E-mail: _____

Name: _____ Title: _____ Credentials: _____
Organization: _____
Address: _____ City: _____ Zip: _____
Phone: _____ Fax: _____ E-mail: _____

Practice Type (check all that apply):

☐ Public Health Department ☐ Community Health Center ☐ Private Practice

☐ Indian Health Services ☐ K-12 School ☐ Academic Institution ☐ Hospital

☐ Other (Please Specify) _____

Breakout Sessions will be scheduled for 50 minutes.

Will this presentation need the full 50 minutes (including Q/A time)? ☐ Yes ☐ No

If No, what is the estimated length? _____

Shorter presentations will be coupled with other proposals.

AV Needs _____

Learning Objectives: List a minimum of three learning objectives for the proposed session. Learning objectives should:

Session Abstract (125 words maximum): This paragraph will be used to describe your presentation in the conference program guide. Please identify the topics that the session will cover, keeping in mind that attendees will have several session options to select from for each time period. The abstract should clearly and succinctly summarize the session content and learning objectives.

Session Description (300 words maximum): The session description will be the primary tool that the selection committee uses to evaluate the proposal.

Presenter(s) Biographical Statement(s): Please note that these statements will be used in the conference program guide. A resume or CV for each presenter must also be attached for accreditation purposes.

Principal Presenter (150 words maximum):

Co-Presenter(s) (150 words maximum):

Before submitting your proposal, please make sure the following information is included:

- Bio (for all presenters)
- Resumes/Curriculum Vitae (for all presenters)
- AV requirements
- Learning objectives
- Session abstract
- Session description

Failure to submit all necessary documents & attachments may result in proposal deemed ineligible.

Complete form and e-mail to Phil Griffin, Deputy Director, Bureau of Disease Control and Prevention, phil.griffin@ks.gov. For more information, contact Phil by email or at (785) 296-8893.